

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. 52228 Company STATE FUND

☒ Certified copy is hereby furnished.
☐ Certified copy is filed with the county building inspection department.

Date 6-28-82 Applicant WINDSONG ENT

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number 266351 Lic. Class B1

Contractor WINDSONG ENT Date 6-28-82

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

C. W. Watson 6-28-82
 Signature of Applicant or Agent Date

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN					
BUILDING ADDRESS <u>3507 ELLISON</u>					
CITY <u>E.L.A.</u> ZIP _____					
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT			
TRACT	BLOCK	LOT NO.			
OWNER <u>MARTINEZ</u>		TEL. NO. <u>622-7826</u>			
ADDRESS <u>3507 ELLISON</u>					
CITY <u>E.L.A.</u>		ZIP _____			
ARCHITECT OR ENGINEER		TEL. NO.			
ADDRESS					
CONTRACTOR <u>WINDSONG ENT</u>		TEL. NO. <u>633-4481</u>			
ADDRESS <u>9150 SONRISA</u>		LIC. NO. <u>266351</u>			
CITY <u>BELLFLOWER</u>		LIC. CLASS <u>B1</u>			
SQ. FT. SIZE <u>389</u>	NO. OF STORIES <u>1</u>	NO. OF FAMILIES <u>1</u>	CHECK ONE		
DESCRIPTION OF WORK <u>BED RM 1 BATH AND NEW PORCH</u>			NEW <input type="checkbox"/>		
			ADD <input checked="" type="checkbox"/>		
			ALTER <input type="checkbox"/>		
			REPAIR <input type="checkbox"/>		
			DEMOL <input type="checkbox"/>		
USE OF EXISTING BLDG. <u>DWELLING</u>					
APPLICANT (PRINT) <u>C. WATSON</u>		TEL. NO. <u>633-4481</u>			
ADDRESS <u>9150 SONRISA BELLFLOWER</u>					
PRESENT BUILDING ADDRESS					
LOCALITY					
MOVING CONTRACTOR		TEL. NO.			
ADDRESS					
REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE		EXIST. WIDTH
FRONT P.L.					
SIDE P.L.					
P.C. Fee \$			Permit Fee <u>107.50</u>		
			Issuance Fee <u>10.50</u>		
Investigation Fee			Total Fee <u>118.00</u>		

BUILDING ADDRESS <u>3507 E. ELLISON</u>	
LOCALITY <u>E.L.A.</u>	
NEAREST CROSS ST. <u>DITHIAN</u>	
ASSESSOR MAP BOOK	PAGE
USE ZONE <u>R-3</u>	MAP NO. <u>3200</u>
SPECIAL CONDITIONS	
DISTRICT	GROUP
TYPE CONST.	FIRE ZONE
PROCESSED BY <u>Philo</u>	
STATISTICAL CLASSIFICATION <u>I 3</u>	
CLASS NO. <u>4</u>	DWELL. UNITS
APT.	CONDO.

SEWER MAP
BK. <u>PG. 5</u>
VALUATION
\$ <u>15,000⁰⁰</u>
\$
FINAL DATE
FINAL By

VALIDATION

4655
744655
7111
1011800
08211802

SEE REVERSE FOR EXPLANATORY LANGUAGE

TEMPORARY FILE COPY

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WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. 322338 Company STATE FUND

☒ Certified copy is hereby furnished. 3-14-83

☐ Certified copy is filed with the county building inspection department.

Date 6-28-82 Applicant WINDSON 6 ENT

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

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LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number 266351 Lic. Class B1

Contractor WINDSON 6 Date 6-28-82

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all County ordinances and State laws regulating Electrical wiring, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Permittee

Date

76A663
CE-806G (2-80)

APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

5

FOR APPLICANT TO FILL IN				JOB ADDRESS	
NEW RESIDENTIAL BLDGS. & POOLS	EACH	NO.	FEE		
1 & 2-Family, Sq. Ft. _____	\$	—	\$	3507 ELLISON	
Multi-family Sq. Ft. _____		—		LOCALITY E.L.A.	
Residential Swimming Pools _____				NEAREST CROSS ST DITMAN	
Outlets: Rec. <u>7</u> Light <u>4</u> Sw. <u>2</u>	175	13	975	OWNER OR FIRM NAME MARTINEZ	
Total No. <u>12</u> Additional _____				MAIL ADDRESS 3507 ELLISON	
Lighting Fixtures _____	175	4	300	CITY E.L.A. Tel No. 402-7826	
Total No. <u>4</u> First 20 Additional _____				PLAN CHECK APPLICANT	
Fixed Appliances Not Over 1 HP _____				ADDRESS	
Range _____ Heater _____ D.W. _____				CITY _____ Tel No. _____	
Oven _____ Dryer _____ W.M. _____				PERMIT APPLICANT WINDSON 6 ENT.	
Top _____ FAU _____ W.H. _____				ADDRESS 1100 SANRISA	
Hood _____ Fan _____ Other _____				CITY BELLFLOWER Tel No. 633-4401	
Disp. _____ Room Air Cond. _____				LICENSE OR REG. NUMBER 266351 Class B1	
Power Apparatus & Large Appliances				DISTRICT NO. 610 PROCESSED BY	
Size & Type HP, KW, KVA, or KVAR				FINAL DATE	
_____ Up to 1 Incl.				FINAL BY	
_____ Over 1 to 10 Incl.					
_____ Over 10 to 50 Incl.					
_____ Over 50 to 100 Inc.					
_____ Over 100					
Services <u>100AMP</u>	1500	1	1500		
0-200 Amp. Under 600 V					
201-1000 Amp. Under 600 V					
Over 1000 Amp. or Over 600 V					
Temp. Power Pole & Appurtenances					
Sign with One Branch Circuit					
Additional Sign Branch Circuits					
Misc. Conduits & Conductors					
Other (See Complete Fee Schedule)					
PERMIT FEE (Sub-Total)			87.75		
PLAN CHECKING FEE (One-Fourth Permit Fee)			10.50		
PERMIT ISSUING FEE			38.25		
TOTAL FEE					

SEE REVERSE FOR EXPLANATORY LANGUAGE

TEMPORARY FILE COPY

VALIDATION

4657

11.2

11.2

Date _____

SEE REVERSE FOR EXPLANATORY LANGUAGE

0628-82

TEMPORARY FILE COPY

